

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Cruz for President

A. Full Name (Last, First, Middle Initial)

GABRIELA DE LA CABADA

Mailing Address 1629 END STREET

City

EAGLE PASS

State

TX

Zip Code

78852-3473

FEC ID number of contributing
federal political committee.

C

Name of Employer

STUDENT

Occupation

STUDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.897450

Date of Receipt

12 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

5400.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)

GABRIELA DE LA CABADA

Mailing Address 1629 END STREET

City

EAGLE PASS

State

TX

Zip Code

78852-3473

FEC ID number of contributing
federal political committee.

C

Name of Employer

STUDENT

Occupation

STUDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.897450B

Date of Receipt

12 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

-2700.00

☒ Memo Item

REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)

GABRIELA DE LA CABADA

Mailing Address 1629 END STREET

City

EAGLE PASS

State

TX

Zip Code

78852-3473

FEC ID number of contributing
federal political committee.

C

Name of Employer

STUDENT

Occupation

STUDENT

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5400.00

Transaction ID : SA17.904023

Date of Receipt

12 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

☒ Memo Item

REDESIGNATION FROM PRIMARY

Subtotal Of Receipts This Page (optional).....

5400.00

Total This Period (last page this line number only).....